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ATTORNEY DOCKET NO. 94-368

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Essam Sourour

Serial No.: 09/532,357

Group Art Unit: 2739

Filed: March 21, 2000

For: METHODS, SYSTEMS AND APPARATUS FOR PRECOMPENSATING FOR INTERFERENCE AMONG TRANSMITTED CODED SIGNALS

Date: June 20, 2000

Assistant Commissioner for Patents
Washington, DC 20231

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REQUEST FOR CORRECTED FILING RECEIPT

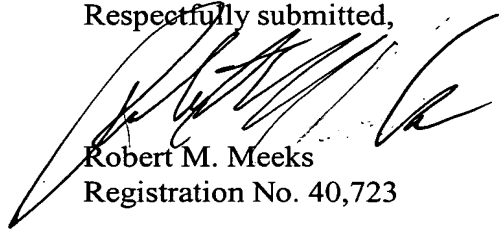
Sir:

In reviewing the filing receipt (copy attached) for the above-referenced application, Applicant notes the following typographical errors.

- In the drawings, please delete "27" and substitute - 10 - therefor.
- In the title, please insert -- , -- following "Methods."

Applicant respectfully requests that these corrections be made and that a corrected filing receipt be issued.

Respectfully submitted,

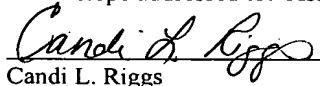


Robert M. Meeks
Registration No. 40,723

Myers Bigel Sibley & Sajovec
PO Box 37428
Raleigh NC 27627
Telephone (919) 854-1400
Facsimile (919) 854-1401

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner For Patents, Washington, DC 20231, on June 20, 2000.



Candi L. Riggs
Date of Signature: June 20, 2000

Rmm

FILING RECEIPT



OC000000005159539

UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark OfficeAddress: ASSISTANT SECRETARY AND
COMMISSIONER OF PATENT AND TRADEMARKS
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/532,357	03/21/2000	2739	1134	8194-368	27 10	36	5

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Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

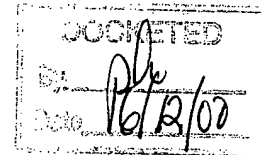
Applicant(s)

Essam Sourour, Cary, NC ;

Continuing Data as Claimed by Applicant

Foreign Applications

If Required, Foreign Filing License Granted 06/06/2000



Title

Methods systems and apparatus for precompensating for interference among transmitted coded signals (3)

Preliminary Class

370

Data entry by : MARTIN, DIANE

Team : OIPE

Date: 06/06/2000





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Title 37, Code of Federal Regulations, 5.11 & 5.15**

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- The articles such as "a," "an" and "the" are not included as the first words in the title of an application. They are considered to be unnecessary to the understanding of the title.
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Bib Data Sheet


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Patent and Trademark Office

Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

SERIAL NUMBER 09/532,357	FILING DATE 03/21/2000 RULE -	CLASS 370	GROUP ART UNIT 2739	ATTORNEY DOCKET NO. 8194-368	
APPLICANTS Essam Sourour, Cary, NC ;					
** CONTINUING DATA ***** <i>mw</i>					
** FOREIGN APPLICATIONS ***** <i>mw</i>					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/06/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no		STATE OR COUNTRY NC	SHEETS DRAWING 10	TOTAL CLAIMS 36	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance					
Verified and Acknowledged		Examiner's Signature <i>mw</i>		Initials	
ADDRESS 20792					
TITLE Methods, systems and apparatus for precompensating for interference among transmitted coded signals					
FILING FEE RECEIVED 1134	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		